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42A740-ES (10-98)
COMMONWEALTH
OF KENTUCKY

Form 740-ES
CALENDAR YEAR

For FISCAL year filers ONLY
FISCAL year ending __ __ / __ __

KY

KENTUCKY ESTIMATED TAX VOUCHER

INSTALLMENT

Your Social Security No.	Spouse's Social Security No.
--------------------------	------------------------------

Amount of this payment. \$



Make check payable to:
Kentucky State Treasurer.

Mail to:
Kentucky Revenue Cabinet
Frankfort, KY 40620-0009

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